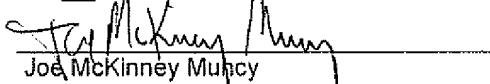


MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

AMENDMENT TRANSMITTAL LETTER				Docket No. 2450-0591P																																											
Application No 10/716,631-Conf. #6340	Filing Date November 20, 2003	Examiner U. C. Ruddock			Art Unit 1771																																										
Applicant(s): Jone CHANG																																															
Invention: RESILIENT AND COLORED BATH SPONGE																																															
<p>MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p>																																															
<table border="1"> <thead> <tr> <th colspan="6">CLAIMS AS AMENDED</th> </tr> <tr> <th></th> <th>Claims Remaining After Amendment</th> <th>Highest Number Previously Paid</th> <th>Number Extra Claims Present</th> <th>Rate</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>5</td> <td>- 20 =</td> <td>0</td> <td>x 25 00</td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>1</td> <td>- 3 =</td> <td>0</td> <td>x 100 00</td> <td>0.00</td> </tr> <tr> <td colspan="6">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> </tr> <tr> <td colspan="6">Other fee (please specify):</td> </tr> <tr> <td colspan="6">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00</td> </tr> </tbody> </table>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	5	- 20 =	0	x 25 00	0.00	Independent Claims	1	- 3 =	0	x 100 00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00					
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TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00																																															
<p><input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity</p> <p><input checked="" type="checkbox"/> No additional fee is required for this amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed</p> <p><input type="checkbox"/> A check in the amount of \$ _____ is enclosed</p> <p><input type="checkbox"/> Payment by credit card Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No 02-2448 as described below. A duplicate copy of this sheet is enclosed</p> <p><input type="checkbox"/> Credit any overpayment</p> <p><input type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.</p>																																															
<p> Dated: January 18, 2007</p> <p>Joe McKinney Muncy Attorney Reg. No.: 32,334</p> <p>BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P O Box 747 Falls Church, Virginia 22040-0747 (703) 205-8026</p>																																															